By Amy Bentley

Dr. Mary Ann Wilkinson
CHOC Pediatrician

Dr. Wilkinson is the current Chief of Staff at CHOC at Mission Hospital. She is completing her second term as Chief of Staff at the end of this year. Dr. Wilkinson completed both her internship and pediatric residency at Harbor-UCLA Medical Center in Torrance. Dr. Wilkinson started out in medicine as a pediatric oncology nurse prior to medical school at UCSF and has been a pediatrician in South Orange County since 1992, currently practicing at Sea View Pediatrics.

Dr. Wilkinson’s philosophy of care: “I believe being a doctor for children is truly a family affair, requiring a joint effort between the doctor and parents to raise a healthy and happy child.”

EDUCATION:
University of California, San Francisco Medical School

BOARD CERTIFICATIONS:
Pediatrics

4 Months
AGE WHEN COLIC SYMPTOMS RESOLVE IN 80-90% OF BABIES

5 p.m. - midnight
FUSSY HOURS FOR MANY COLICY BABIES

COPING WITH COLIC

• Don’t over-feed or under-feed your baby.
• Make sure to burp the baby well after each feeding.
• Breastfeeding moms can try to avoid caffeine, milk products, gassy and spicy foods from their diet to avoid passing these onto the baby in the breast milk. Formula fed babies can be given a hypoallergenic formula.
• Use a pacifier
• Try various “motion” techniques to soothe the infant, such as walking him around in a baby carrier or stroller, driving him around in the car in his car seat, putting him in a swing or bouncy seat that vibrates, or using “white noise,” from a fan or white noise machine, to soothe him. Swaddle the baby to give him the feeling of being in the womb.
• Decrease environmental stimuli by turning off TVs, stereos, radios and by turning down the household lights.
• Get a break. Ask a relative, neighbor, friend or babysitter to watch the baby and get away for a while.

Up To 40%
ESTIMATED % OF INFANTS THAT HAVE COLIC

WHAT IS COLIC?
Colic is the term used to describe uncontrollable crying in an otherwise healthy infant during its first three to four months of life. “We typically diagnose colic if the baby is crying at least three hours a day, for three or more days per week and for three weeks or more,” says Dr. Wilkinson. “We don’t know exactly why colic occurs but it is thought that these babies are unusually sensitive to stimuli and are unable to self-console or regulate their nervous systems.

COLIC, BREASTFEEDING AND FOOD INTOLERANCE
Sometimes colicky babies are responding to a discomfort in digestion. A colicky baby can be sensitive to foods in the mother’s breast milk, so it may helpful for mothers to eliminate milk products, caffeine, spicy and gas producing foods to see if this improves the baby’s digestion, Dr. Wilkinson suggests. If formula is used, switching to a hypoallergenic formula may be worth a try to decrease gas and ease digestion, she adds.

Ranked Among the Nation's Top Children's Hospitals for Neonatology
Recognized as one of the leading neonatology programs in the nation, CHOC Children’s Neonatal Intensive Care Unit (NICU) combines the latest in life-saving technology and trained neonatal specialists to provide care for the tiniest patients — most often premature babies suffering from respiratory and circulatory problems. Our team is committed to providing family-centered care and is dedicated to listening to and honoring each family’s perspectives, choices, values and culture.

Learn more at choc.org/NICU

Experts In: Keeping your baby healthy Learn more about colic at choc.org/health.